

Department of Toxic Substances Control



2005 Biennial lazardous Maste Report

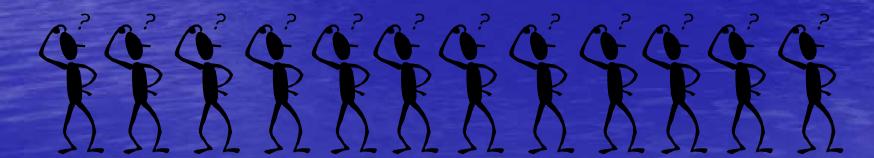
Betsy Vail, Project Manager **Hazardous Waste Management Program** (916) 322-2880

E-mail: brsstaff@dtsc.ca.gov

Forum: www.calepa.ca.gov/forums/

Why Do This Report?

- 1) Feeds USEPA database for analysis
- 2) Measures waste minimization efforts in industry groups
- 3) Improves understanding of hazardous waste generation and management
- 4) Summarizes and communicates the results of the reporting effort to the public.



Who has to file?

- RCRA Large Quantity Generators (LQGs)
- RCRA Treatment, Storage, and Disposal Facilities (TSDFs)



RCRA Large Quantity Generators (LQGs)

(CFR, T40, §262.41)

- Generated 1,000 kg (2,200 lbs) or more of RCRA hazardous waste; OR
- Generated or accumulated more than 1 kg
 (2.2 lbs) of RCRA acute hazardous waste; OR
- Generated or accumulated more than 100 kg (220 lbs)
 of spill cleanup material contaminated with RCRA
 acute hazardous waste

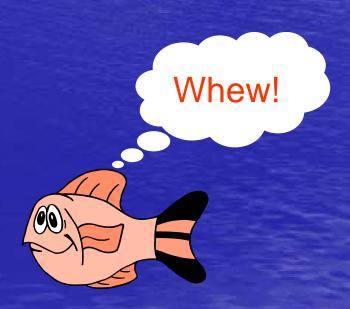
In any single calendar month!

Exempt / Excluded Wastes

Exempt / Excluded waste are NOT to be reported

(Unless they have RCRA components)





Examples of Exempt / Excluded Wastes

- Oil filters
- Used oil that is recycled
- Polychlorinated Biphenyl (PCB) wastes
- Wastewater that is treated w/o any storage
- Universal wastes batteries, Hg thermostats
- Samples undergoing treatability studies
- Wastes recycled, w/o prior storage, in an on-site process
- Wastes shipped directly to a foreign country

Reporting Packages

- Were mailed by the end of December
- Included the following information:
 - 1) Forwarding Letter & Supplemental Instructions
 - 2) USEPA Hazardous Waste Report Instructions and Forms

Material posted on DTSC's Website at

www.dtsc.ca.gov

- Click on the link Managing Waste.
- Click on the link 2005 Biennial Hazardous Waste Report.

Required Forms

ID Required for all filers

GM Required for all RCRA LQGs and TSDFs

WR Required for all RCRA TSDFs

Please do NOT submit...

- OI Forms (although the USEPA requests them)
- Non-RCRA waste information





Unless they have RCRA components

Changes from the 2003 to the 2005 Report?

- No Change to the Reporting Requirements
- No Change to the Flat File Specifications

All Fields are Mandatory!

			OMB#: 2050-0024	Expires 10/31/2007		
SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM					
1. Reason for Submittal (See instructions on page 9) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) As a component of a First RCRA Hazardous Waste Part A Permit Application As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) As a component of the Hazardous Waste Report					
2. Site EPA ID Number (page 10)	EPA ID Number					
3. Site Name (page 10)	Name:					
4. Site Location	Street Address:					
Information (page 10)	City, Town, or Village:		State:			
	County Name:		Zip Code:			
5. Site Land Type (page 10)	Site Land Type: Private County District Federal Indian Municipal State Other					
6. North American Industry Classification	Α.	В.				
System (NAICS) Code(s) for the Site (page 10)	C.	D.				
7. Site Mailing Address	Street or P. O. Box:					
(page 11)	City, Town, or Village:					
	State:					
	Country:		Zip Code:			
8. Site Contact	First Name:	MI:	Last Name:			
Person (page 11)	Phone Number: Extension:		E-mail address:			
9. Operator and Legal Owner	A. Name of Site's Operator:		Date Became Operator (mm/dd/yyyy):			
of the Site (pages 11 and 12)	Operator Type: Private County District	al Indian Municipal State Othe				
	B. Name of Site's Legal Owner:		Date Became Owner (mm/dd/yyyy):			
	Owner Type: ☐ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other					
	EP	A Form 870	00-13 A/B (Revised 10/2	005)Page 1 of 3		

SITE ID (Page 1 - Top)

SEND COMPLETED FORM TO:	United States Environmental Protection Agency				
The Appropriate State or EPA Regional Office.	RCRA SUBTITLE C SITE IDENTIFICATION FORM				
1. Reason for Submittal (See instructions on page 9) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: ☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) ☐ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) ☐ As a component of the Hazardous Waste Report				
2. Site EPA ID Number (page 10)	EPA ID Number				
3. Site Name (page 10)	Name:				
4. Site Location	Street Address:				
Information (page 10)	City, Town, or Village:	State:			
	County Name:	Zip Code:			
5. Site Land Type (page 10)	Site Land Type: ☐ Private ☐ County ☐ District ☐ Federal	☐ Indian ☐ Municipal ☐ State ☐ Other			

SITE ID (Page 1 - Bottom)

6. North American Industry Classification	A.	В.				
System (NAICS) Code(s) for the Site (page 10)	C.	D.				
7. Site Mailing	Street or P. O. Box:					
Address (page 11)	City, Town, or Village:					
	State:					
	Country:	Zip Code:				
8. Site Contact Person	First Name:	MI:	Last Name:			
(page 11)	Phone Number: Extensio	n:	E-mail address:			
9. Operator and Legal Owner	A. Name of Site's Operator:	Date Became Operator (mm/dd/yyyy):				
of the Site (pages 11 and 12)	Operator Type: ☐ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other					
	B. Name of Site's Legal Owner:	Date Became Owner (mm/dd/yyyy):				
	Owner Type: Private County District	☐ Federal	□ Indian □ Municipal □ State □ Other			

SITE ID (Page 2) All fields are Mandatory!

Potential Problems:

9. Legal Owner	Street or P. O. Box:							
(Continued) Address	City, Town, or Village:							
Addiess	State:							
Country:					Zip Code:			
10. Type of Regulate Mark "Yes" or "N		plete any	additional boxes a	s instructe	d. (See instructions on pages 13 to 16.)			
A. Hazardous Wa	aste Activities parts for 1 through 6.							
Y ■ N □ 1. Generator of Hazardous Waste					2. Transporter of Hazardous Waste			
If "Yes", o	choose only one of the fo	ollowing -	a, b, or c.	W = W =				
 a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or 			YUNU	Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.				
	 □ b. SQG; 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or □ c. CESQG; Less than 100 kg/mo (220 lbs./mo.) 			YONO	Recycler of Hazardous Waste (at your site)			
3 0, 010	of non-acute hazard		00000000000000000000000000000000000000	YDND	5. Exempt Boiler and/or Industrial			
In addition, indicate other generator activities.					Furnace If "Yes", mark each that applies.			
Y □ N □ d. United States Importer of Hazardous Waste					 a. Small Quantity On-site Burner Exemption 			
Y □ N □ e. Mixed Waste (hazardous and radioactive) Generator					□ b. Smelting, Melting, and Refining Furnace Exemption			
				YDND	6. Underground Injection Control			
B. Universal Waste Activities Y □ N □ 1. Large Quantity Handler of Universal Waste (accumulate				C. Used Oil Activities Mark all boxes that apply.				
	or more) [refer to your S			YONO1	Used Oil Transporter			
	what is regulated]. Ind				If "Yes", mark each that applies.			
	nerated and/or accumulation	ited at you	ır site. If "Yes",		□ a. Transporter□ b. Transfer Facility			
mark an b		Generate	Accumulate		G b. Harrister Facility			
				YONO	2. Used Oil Processor and/or Re-refiner			
a. Batteries					If "Yes", mark each that applies. a. Processor			
b. Pesticide					□ b. Re-refiner			
c. Thermos	tats			W = N = 4				
d. Lamps			-	YUNU	3. Off-Specification Used Oil Burner			
	pecify)			YOND	4. Used Oil Fuel Marketer			
f. Other (specify)				If "Yes", mark each that applies.				
g. Other (sp	pecify)		•		 a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner 			
	on Facility for Universal ardous waste permit may		d for this activity.		■ b. Marketer Who First Claims the Used Oil Meets the Specifications			

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SITE ID (Page 3)

Mandatory Fields

EPA ID#

Box 11: A

Box 13: Signature, Name, Date

Please add your FAX number and E-Mail Address below your signature.

Potential Problems:

A. Waste Codes for Federally Regu					
handled at your site. List them in additional page if more spaces are	the order they are pr				
					44 7/2
B. Waste Codes for State-Regulate hazardous wastes handled at your more spaces are needed for waste	site. List them in th	**			
		9.2.10	12	1	
		. 17			
Comments (See instructions on p	age 17.)				
			7		
			V		
					-
	1				
. Certification. I certify under penalt	v of law that this doc	ument and all att	achments were pre	epared under my dire	ection or
pervision in accordance with a system	designed to assure	that qualified per	sonnel properly ga	ther and evaluate the	e information
pervision in accordance with a system bmitted. Based on my inquiry of the p	n designed to assure erson or persons wh	that qualified per o manage the sys	sonnel properly gastem, or those pers	ather and evaluate the sons directly respons	e information ible for gatherin
pervision in accordance with a system printed. Based on my inquiry of the p	n designed to assure erson or persons wh	that qualified per o manage the sys	sonnel properly gastem, or those pers	ather and evaluate the sons directly respons	e information ible for gatherin
pervision in accordance with a system omitted. Based on my inquiry of the p e information, the information submitte	n designed to assure erson or persons whe d is, to the best of m	that qualified per o manage the sys ny knowledge and	sonnel properly ga stem, or those pers belief, true, accur	ather and evaluate the sons directly respons ate, and complete. I	e information ible for gatherin am aware that
pervision in accordance with a system omitted. Based on my inquiry of the p information, the information submitte are are significant penalties for submit	n designed to assure erson or persons whe d is, to the best of m	that qualified per o manage the sys ny knowledge and	sonnel properly ga stem, or those pers belief, true, accur	ather and evaluate the sons directly respons ate, and complete. I	e information ible for gatherin am aware that
pervision in accordance with a system omitted. Based on my inquiry of the p e information, the information submitte are are significant penalties for submit	n designed to assure erson or persons whe d is, to the best of m	that qualified per o manage the sys ny knowledge and	sonnel properly ga stem, or those pers belief, true, accur	ather and evaluate the sons directly respons ate, and complete. I	e information ible for gathering am aware that
pervision in accordance with a system omitted. Based on my inquiry of the particle information, the information submitted are are significant penalties for submitted instructions on page 17.)	n designed to assure erson or persons whe d is, to the best of m	that qualified per o manage the sys ny knowledge and	sonnel properly ga stem, or those pers belief, true, accur	ather and evaluate the sons directly respons ate, and complete. I	e information ible for gathering am aware that nowing violations
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pervision in accordance with a system omitted. Based on my inquiry of the perinformation, the information submitter are significant penalties for submitter instructions on page 17.) gnature of operator, owner, or an	n designed to assure erson or persons wh do is, to the best of m ting false information	that qualified per o manage the syn y knowledge and n, including the post of Title (type or p	sonnel properly gastem, or those persistem, or those persistem, accur- possibility of fine and print)	ather and evaluate the sons directly respons ate, and complete. I	e information ible for gatherin am aware that nowing violation
pervision in accordance with a system bmitted. Based on my inquiry of the p e information, the information submitte ere are significant penalties for submit ee instructions on page 17.) gnature of operator, owner, or an	n designed to assure erson or persons wh do is, to the best of m ting false information	that qualified per o manage the syn y knowledge and n, including the post of Title (type or p	sonnel properly gastem, or those persistem, or those persistem, accur- possibility of fine and print)	ather and evaluate the sons directly respons ate, and complete. I	e information ible for gathering am aware that
c. Certification. I certify under penalt pervision in accordance with a system britted. Based on my inquiry of the pe information, the information submitteere are significant penalties for submittee instructions on page 17.) gnature of operator, owner, or an athorized representative	n designed to assure erson or persons wh do is, to the best of m ting false information	that qualified per o manage the syn y knowledge and n, including the post of Title (type or p	sonnel properly gastem, or those persibelief, true, accur ossibility of fine and	ather and evaluate the sons directly respons ate, and complete. I	e information ible for gatherin am aware that nowing violation

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GM Form

Mandatory Fields

Site Name EPA ID #

Sec. I: Boxes A, B, D, F, & G

Sec. II: All Boxes

Sec. III: Boxes A, B, & D

Potential Problems:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER: SITE NAME: EPA ID NO: L L L L L L L			FORM GM	U.S. ENVIRONMENTAL PROTECTION AGENCY 2005 Hazardous Waste Report WASTE GENERATION AND MANAGEMENT	
Instructi	ions: Please see the detailed instructions on pa	ages 18 to 26 of	this booklet befor	re completing this form.	41-40
Sec. 1	A. Waste description				
В. ЕРА	hazardous waste code	C. State hazardous waste code			
	rce code LG nagement Method code for Source code G25	E. Form code	F. Quantity gen		Density Ibs/gal sg
Sec. 2	Was any of this waste managed on site? (pag 1 Yes (CONTINUE TO ON-SITE PROCES 2 No (SKIP TO SEC. 3)	and the second second			
	E PROCESS SYSTEM 1		Toronto and the contraction of	ESS SYSTEM 2	
On-site Management Quantity treated, disposed, or Method code recycled on site in 2005			On-site Management Quantity treated, disposed, or recycled on site in 2005		
"					ш
Sec. 3	A. Was any of this waste shipped off site in 1 Yes (CONTINUE TO BOX B) 2 N	2005 for treatmood (FORM IS CO		recycling? (pages 25 and 26)	
Site 1	B. EPA ID No. of facility to which waste was shipped		anagement Metho	D. Total quantity shipp	ed in 2005
		code Shipped to			ш.ш
Site 2	B. EPA ID No. of facility to which waste	C. Off-site Management Method D. Total quantity shipped in		ed in 2005	
	was shipped		hipped to		ال.ســ
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method D. Total quantity			
					ت.بي
Comments:					

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Page _ of

GM FORM - WASTE ACTIVITY



You need a GM FORM for each waste generation activity

- Generated and shipped in 2005
- Generated in 2004 and shipped in 2005
- Generated in 2005 and shipped in 2006

GM FORM Grouping of RCRA Waste

- 1) **Waste-Generating Process Level**
 - Generated with the same source code
- 2) Cumulative Waste Code Level
 - Same waste codes, 1 or more source codes
- 3) Manifest-Shipment Level
 - Shipped together with 1 or more source codes
- 4) Aggregate Lab Packs
 - Same form code
- Lab Packs must be reported as separate wastes if they contain RCRA Acute Hazardous waste (i.e. F020, F021, F022, F023, F026, F027, and all "P" waste codes.)

WR Form

Mandatory Fields

Site Name EPA ID # Boxes A, B, D, E, F, & H

Potential Problems:

	a make a sure of the sure of t		OMB#: 2050-0024 Expires 10/31/2007
BEFORE COPYING FORM, ATTACH SITE	IDENTIFICATION LABEL		U.S. ENVIRONMENTAL
OR ENTER:			PROTECTION AGENCY
SITE NAME:			
-			2005 Hazardous Waste Report
		FORM	WASTE RECEIVED
EPA ID NO:		WR	FROM OFF SITE
Instructions: Please see the detailed instru	ictions on pages 27 to 30 of t	his hooklet hefore	completing this form
A. Description of hazardous wa		lous waste code	C. State hazardous waste code
1			
		للللا	
D. Off-site handler EPA ID number	E. Quantity received in 20	005	F. UOM Density
			سابس سا
			□ 1 lbs/gal □ 2 sg
G. Form code	H. Management Method co		Li i ibs/gai Li z sg
	650	de	
[w]	L#1111		
A. Description of hazardous wa	ste B. EPA hazard	dous waste code	C. State hazardous waste code
Waste		للللا ل	
2		لللبا ل	
D. Off-site handler EPA ID number	E. Quantity received in 2		F. UOM Density
☐ Mark if same as in Waste 1	E. Quantity received in 2	005	
		ETTI	
			□ 1 lbs/gal □ 2 sg
G. Form code	H. Management Method co	de	
[w]	[H]		
A. Description of hazardous was	ste B FPA hazaro	dous waste code	C. State hazardous waste code
Waste			
3			
Off-site handler EPA ID number Mark if same as in Waste 2	E. Quantity received in 2	005	F. UOM Density
Walk it sallie as it! waste 2			О Ш.Ш
			□ 1 lbs/gal □ 2 sg
G. Form code	H. Management Method	code	- III
[M]	[H] []		
Comments:	7,711,711,711		

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Form and Data Errors

- Reports will be returned if errors are found
- LQG / TSDF will have 2 weeks to correct the data and return it to DTSC
- Use Waste Reporting software to avoid erroneous data

Biennial Reporting Software

Link for available download located at:
 www.dtsc.ca.gov

*Click on the link *Managing Waste.**Click on the link *2005 Biennial Hazardous Waste Report*.

- Only files that meet the USEPA's flat file specifications will be accepted
- Goal: Reduce the number of errors submitted
- Paper submissions will automatically be audited

Waste Reporter Software

- 32-bit software running on Windows 95 or later
- Imports USEPA flat files
- Validates Data conforms to USEPA data error checks
- Prompts for error correction prior to export
- One-button generation of zipped flat file
- FREE Download!



Report installation and software problems at...

(916) 322-2880

brsstaff@dtsc.ca.gov

www.calepa.ca.gov/forums/

Friendly staff are waiting to assist you.

6 Helpful Tips

1. All mandatory fields must be completed with valid information.

- 2. If submitting on paper, make sure all entries are legible. Proofread your forms before submitting them.
- 3. Sign and date the ID form. Add a FAX number in the comments section. When submitting electronically on floppy disk or CD-ROM, the signed ID form is required.

6 Helpful Tips

- 4. Don't report non-RCRA waste if there are no RCRA components.
- 5. Make sure that all UOM fields are completed if the reporting unit is gallons, liters, or cubic yards (UOMs 5, 6, or 7)
- 6. Submit an exemption form if you are not filing.

Verify all offsite EPA IDs

Use USEPA's "Envirofacts" query page to verify permanent federal numbers at:

www.epa.gov/enviro/index_java.html

Or call

(415) 495-8895

How to Contact DTSC and the USEPA



DTSC BRS Helpline (916) 322-2880 brsstaff@dtsc.ca.gov www.calepa.ca.gov/forums/





Due / Postmarked Date

March 1, 2006
- or -

Potential RCRA Violation!

Return Mail to:



Biennial Reporting Staff
Department of Toxic Substances Control
Hazardous Waste Management Program
PO Box 806
Sacramento, CA 95812-0806

The Best and Last Bit of Advice...

PLEASE USE THE SOFTWARE!